

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P96000029519 (1)

1. Corporation Name
KOPY KAT INTERNATIONAL, INC.

Principal Place of Business
1321 S 30 AVE
HOLLYWOOD FL 33020

Mailing Address
1321 S 30 AVE
HOLLYWOOD FL 33020-5633



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/04/1996		3a. Date of Last Report	
21	3475 Sheridan St.	26	3475 Sheridan St.	4. FEI Number 65-0674367		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22	301	27	301	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
23	Hollywood FL	28	Hollywood FL				
24	33020	25	USA	29	33021	30	USA
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WEISER, HOWARD 8632 NW 54 STREET CORAL SPRINGS FL 33067							
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D P
NAME	WEINBERG, BARRY M	12 NAME	Weinberg, Barry M.
STREET ADDRESS	4410 NW 36 STREET	13 STREET ADDRESS	3320 Pinewalk Dr. North #1717
CITY-ST-ZIP	LAUDERDALE LAKES FL 33319	14 CITY-ST-ZIP	Margate FL 33063
TITLE	D	21 TITLE	D V
NAME	WEISER, HOWARD	22 NAME	Weiser, Howard
STREET ADDRESS	8632 NW 54 STREET	23 STREET ADDRESS	8632 NW 54TH ST
CITY-ST-ZIP	CORAL SPRINGS FL 33067	24 CITY-ST-ZIP	Coral Springs FL 33067
TITLE	D	31 TITLE	D V S T
NAME	SIMON, SAMUEL J	32 NAME	Simon, Samuel J.
STREET ADDRESS	17077 NW 16 STREET	33 STREET ADDRESS	17077 NW 16TH ST
CITY-ST-ZIP	PEMBROKE PINES FL 33028	34 CITY-ST-ZIP	Pembroke Pines FL 33028
TITLE	D	41 TITLE	
NAME	SEJAS, JOSE M	42 NAME	
STREET ADDRESS	11938 SW 74 TERRACE	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33183	44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)